K01246951 Page 1 of 2

DEC 0 3 2001



## SUMMMARY OF SAFETY AND EFFECTIVENESS

**Applicant or Sponsor:** 

Arthrotek, Inc.

(A wholly owned subsidiary of Biomet, Inc.)

56 East Bell Drive P.O. Box 587

Warsaw, Indiana 46581-0587

Establishment Registration No.: 1825034

**Contact Person:** 

Sara B. Shultz

Biomet Manufacturing, Corp.

P.O. Box 587

Warsaw, Indiana 46581-0587

Phone: (219) 267-6639 FAX: (219) 372-1683

**Proprietary Name:** 

Resorbable No Profile Screw and Washer

**Common or Usual Name:** 

resorbable screw and washer

**Classification Name:** 

Screw, Fixation, Bone, Non-spinal, Non-metallic

(888.3040)

Washer, Bolt Nut, Non-spinal, Non-metallic

(888.3030)

**Device Product Code:** 

87HWC and HTN

Legally Marketed Devices To Which Substantial Equivalence is Claimed:

Arthrotek Interference Screw (Biomet, Inc., K982497), Harpoon Suture Anchor (Biomet, Inc., K943806/K973775), Sutureless Anchor (Innovasive Devices, K984490), EndoPearl™ with Threader (Linvatec Corp., K993339)

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**Indications for Use:** The Resorbable No Profile Screw and Washer is indicated for the following procedures:

- 1. ACL and PCL reconstruction
- 2. Medial collateral ligament repair
- 3. Lateral collateral ligament repair
- 4. Posterior oblique ligament repair
- 5. Iliotibial band tenodesis reconstruction
- 6. Patellar ligament and tendon repair

MAILING ADDRESS P.O. Box 587 Warsaw, IN 46581-0587 SHIPPING ADDRESS Airport Industrial Park Warsaw, IN 46580



This device is also intended to be used as back-up fixation in ACL reconstruction in conjunction with other marketed devices in order to provide additional fixation strength in instances of questionable bone quality.

Device Description: The Resorbable No Profile Screw and Washer consists of a resorbable 6.5 mm screw that varies in length from 25 mm to 55 mm (5 mm increments) and a 18 mm diameter washer. This device is comprised of a PLLA/PGA copolymer.

The device was designed to be used in conjunction with marketed devices such as resorbable or allograft interference screws in ACL reconstruction. The purpose of this back-up fixation will be to provide additional fixation strength in instances of questionable bone quality.

**Summary of Technologies:** The Resorbable No Profile Screw and Washer technological characteristics (materials, design, sizes, and indications) are similar to or identical to the predicate devices.

Non-Clinical Testing: Mechanical testing was performed to establish substantial equivalence to the predicate devices.

Clinical Testing: Clinical testing was not used to establish substantial equivalence to predicate devices.

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Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

DEC 0 3 2001

Biomet Manufacturing, Corporation c/o Ms. Sara B. Shultz Regulatory Specialist P.O. Box 587 Warsaw, Indiana 46581-0587

Re: K012469

Trade/Device Name: Resorbable No Profile Screw and Washer

Regulation Number: 888.3040 and 888.3030

Regulation Name: Smooth or Threaded Metallic Bone Fixation Fastener

and Single/Multiple Component Metallic Bone Fixation

Appliances and Accessories

Regulatory Class: Class II Product Code: HWC and HTN

Dated: October 24, 2001 Received: October 25, 2001

Dear Ms. Shultz:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act

or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listingPage (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

Director

Divison of General, Restorative and

Neurological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

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510(k) NUMBER (IF KNOWN): K0/2469
DEVICE NAME: Resorbable No Profile Screw and Washer
INDICATIONS FOR USE:
The Resorbable No Profile Screw and Washer is indicated for the following procedures:  1. ACL and PCL reconstruction 2. Medial collateral ligament repair 3. Lateral collateral ligament repair 4. Posterior oblique ligament repair 5. Iliotibial band tenodesis reconstruction 6. Patellar ligament and tendon repair
This device is also intended to be used as back-up fixation in ACL reconstruction in conjunction with other marketed devices in order to provide additional fixation strength in instances of questionable bone quality.
(PLEASE DO NOT WRITE BELOW THIS LINE. CONTINUE ON ANOTHER PAGE IF NEEDED.)
Concurrence of CDRH, Office of Device Evaluation (ODE)
Prescription Use OR Over-The-Counter-Use (Optional Format 1-2-96)
(Division Sign-Off) Division of General, Restorative and Neurological Devices

000003 510(k) Number K613469